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Bib Data Sheet

CONFIRMATION NO. 5012

<b>SERIAL NUMBER</b> 09/866,394	<b>FILING DATE</b> 05/25/2001 <b>RULE</b>	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2612	<b>ATTORNEY DOCKET NO.</b> US 010265
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**\*\* CONTINUING DATA \*\*\*\*\*** NONE

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** NONE

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 07/26/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 38	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>T.J. Z.</i> Initials: T.Z.				

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**TITLE**  
 Compact visual summaries using superhistograms and frame signatures

<b>FILING FEE RECEIVED</b> 1114	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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